Attachment 1
Page 1 of 1

MR X-136629 No. 2/7/01 Rocky Science Center, LLC 433624

Thousand Oa... P.A. 444 High St., ... Palo Alto, CA 9430

SELLER
TELEPHONE: (972) 234-0068
FAX: (972) 234-0069
INTELLIGENT PITAVY TECHNOLOGY
Attn: PHILIP CHU JIMI FANG

PRINT ☐

Receipt Option ☑ YES ☐ NO Line No. ____

New Vendor YES ☐

Government/Commercial Contract No.

DPAS Reg. 1-Priority Rating

Provisions attached & made a part hereof: ☐ AK ☐ ____ Other

70-C- ☐ 29 ☐ 33 ☐ 42 ☐ ____

F.O.B. Dest. ☐ or ____

SHIP VIA: [illegible]

(Precious Metals = [illegible]

Supplier Code	SS	Mfg	MBE	>$10K	LS	Size	MBE NEW VENDOR	LS	Woman
U100	LTX		02	A1					

Resale: ☐ No (-) ☑ Yes-Calif. Permit SS OHB97014167

DUNS#:

PAYMENT TERMS NE

(1) ITEM	(2) QTY	(3) U/M	DESCRIPTION/SUPPLIER PART NO. (4)	PROMISED DELIVERY DATE	UNIT PRICE
1	4	EA	ROC-SIBT-THIN COLLECTOR 11.63 mm I.P	ASAP OR SOONER	$7,400.00
2	4	EA	ROC-DIBT-THIN COLLECTOR 11.63 mm I.P	"	$7,500.00
			Total 8 I.P HBT wafers.		
			See attached Quote		
			Reference Quote No 187c12 dated 2/5/01		

Requester (5): B. Brar | Dept: 764 | RM # OR LAB # FOR DELIVERY: 306 | M/C: A24 | Ext.: 4709 | Date: 2/6

Approvals (11): [signature] Date: 2/6/01

Financial Use Only:
Asset # ____
Close to Acct. # by Item: 220301-100
43501-0008
Financial Approval [signature] Date 2/6/01
Buyer Approval [signature] Date 2/6/01

Suggested Suppliers: (6) Phone #
1) TRIQUINT SEMI 503 615 9000 or 972 234 0068
2) ____
3) ____

Est. Cost: (7) $20,000 Date Req'd: (8) STANDARD: ☐ or ____

(9) ACCOUNTING: Requester, INITIAL HERE: ____ (IR&D, CAPITAL or DIRECT CHARGE only) to affirm that all questions under Section (9) on reverse of Spender have been reviewed and are "NO". If any "YES", identify by # ____

CHARGE: Expense ____ IR&D ____ Lease ____ Direct X Capital* ____
G.O. # 22014 43501 0008
*If capital, indicate investment justification:
Expanded capability ____ Supports Contract # ____
Envir. Health & Safety ____ Cost Savings ____ Other ____
Prev. authorized spenders this project? ____ Cum. Amt. $ ____

(10) SAFETY/ENVIRONMENTAL APPROVAL: Requester, please check ✓ boxes if . . .

☐ Hazardous Material ☐ Equipment Using Hazardous Material or Producing Hazardous Emissions
((NOTE:) see reverse of Spender for description of categories)
Approval: ____ (Safety/Environmental) ☐ MSDS